

19. *Therapeutic Action of Sesquicarbonate of Ammonia in Scarlet Fever.*—Dr. JOHN McNAB states (*Edinb. Med. Journ.*, Oct. 1861) that in the spring of 1859 an epidemic of scarlet fever broke out in his neighbourhood (Bunessan, Oban). Most of the cases were of the anginose variety, though there were several cases of the simplex and maligna. “Shortly after its appearance,” he says, “I was casually led to use the sesquicarbonate of ammonia as a gargle for the throat, and forthwith became deeply impressed with its beneficial effects. This led me to employ it internally, and to observe minutely the effects produced. The result of these trials and observations tended more and more to confirm and verify my first impressions. I continued to prescribe it with the greatest advantage to those who became subsequently affected, as long as any trace of the disease remained in the district. When given as a gargle, it was employed in the proportion of two drachms of the salt to six ounces of water—the throat to be gargled with the mixture every four hours. When ordered internally it was prescribed in five or ten-grain doses, according to the age and strength of the patient, and given three times a day. This system of treatment, combined with the general therapeutical indications, was as a general rule attended with marked relief, particularly if the patient was of age sufficient to become impressed with the necessity of using the gargle, and provided the disease had not already involved the throat to such an extent as to interfere with deglutition, and produce organic change and disorganization.

“The specific therapeutical effects of sesquicarbonate of ammonia in scarlet fever seem to depend upon its direct influence on the special blood-poison, from the presence of which in the system the disease arises; for, as scarlet fever is essentially the effect of a specific contagion on the system, and as the sesquicarbonate of ammonia changes or modifies the action of that blood-poison, so there is every reason to believe that the remedy acts specifically, by neutralizing the so-called matières morbi. But apart from any specific influence it exerts, it seems to be of essential service in the treatment of the disease, in consequence of its diaphoretic and sudorific properties, and from the circumstance that it is a prompt and diffusible stimulant, especially of the nervous system, while it possesses the advantage of not accelerating the circulation. Anasarea, which is the most common and the most formidable of the sequelæ of scarlet fever, is not so frequently experienced in those cases where the sesquicarbonate is administered in the early stages of the disease, as where it has not been given at all, or given only when the disease has reached its acmé. This favourable result is probably due to the diaphoretic action of the remedy, which, when freely administered, relieves the kidneys of the undue action they would have to perform in eliminating the blood-poison through the urine.”

20. *Iodide of Potassium in Tuberculous Meningitis.*—Dr. BOURROUSSE DE LAFFORE relates in the *Moniteur des Sciences Médicales*, eight cases of tuberculous meningitis in which he used iodide of potassium with success. The dose is about four and a half grains of iodide of potassium, given every three, four, or five hours, in a little sugar and water. From fifteen to forty grains of the iodide may thus be taken in twenty-four hours. Dr. Bonrrousse de Laffore prefers to add sugar when the medicine is given, as, if it be added to the mixture when it is prepared, decomposition is liable to ensue. He expects great results from this treatment.

21. *Treatment of Chorea by Sulphate of Aniline.*—Dr. JAS. TURNBULL, of Liverpool, states (*Lancet*, Nov. 16, 1861) that he has given the sulphate of aniline in many cases of nervous and convulsive disorder, and has found that it produces some very peculiar as well as useful effects. He has used it in chorea with very good effect.

“Two circumstances,” he says, “led me to make trial of aniline as a medicinal agent—the fact of its being an alkaloid, from which I inferred that it would act energetically on the animal economy, and, probably, on the nervous system, and the fact of its being present in Dippel’s animal oil—an old antispasmodic remedy. This oil, Pereira tells us, is undoubtedly a very powerful agent. Swallowed in moderate doses, it stimulates the vascular and nervous systems, and is esteemed

antispasmodic. It has been used, he states, in hysteria and other affections of the nervous system accompanied with convulsive movements. There are other alkaloids in this oil—pyridine, picoline, lutidine, and collidine—to which its properties may be equally due; but the fact of aniline being the chief of them was one of the reasons that led me to make a trial of the sulphate of this artificial alkaloid.

Dr. T. relates six cases of chorea, and refers to two others in which sulphate of aniline was given with success.

"The beneficial effects," he says, "of sulphate of aniline have been most apparent in severe cases of St. Vitus's dance, and the first and the sixth that I have detailed were as bad cases as any I have met with where recovery has taken place. The others were cases such as usually yield to the ordinary means at present in the hands of the profession. Chorea is a disease which is generally amenable to the means of treatment we at present possess. Obstinate cases, however, occasionally occur where the disease yields only very slowly, or even baffles our treatment altogether. I have seen it prove fatal in more than one case, and Dr. Hughes, in his 'Digest of Cases of Chorea,' published in *Guy's Hospital Reports*, has recorded sixteen fatal cases. The introduction, therefore, of a new remedy, which appears to have a more direct and powerful influence on the disease than any we at present possess, is calculated to be of use, and I trust that it will be found worthy of the attention of the profession. It seems not improbable that it may prove a remedy of utility in other nervous affections. I have tried it in several cases of epilepsy, and in two cases it seemed to be of service; but I have not given it a sufficient trial to enable me to recommend it confidently in any other disease but St. Vitus's dance."

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22. *Chlorate of Potassa in the Treatment of Consumption and Scrofula.*—In our last number (p. 321 *et seq.*), we published a highly interesting and carefully drawn up clinical report by our esteemed colleague, Prof. Austiu Flut, on the treatment of consumption by the chlorate of potassa. The result of these investigations seems to throw great doubt over the remedial powers of that article in phthisis, and such has also been the experience of several other careful practitioners.

A late writer, however, Dr. ALEXANDER HARKIN, of Belfast, claims (*Dublin Quarterly Journal of Medical Science*, Nov. 1861) for the chlorate of potassa great therapeutic powers in consumption and scrofula. Our readers will, we are sure, desire to learn what he has to say on the subject, and we therefore quote his statement.

"For a period," he says, "of nearly eighteen months I have been prescribing this remedy for every variety of scrofulous disease, and for consumption in its various stages; and although, for a disease of such protracted character as consumption, the period of observation is too limited to allow of complete or extensive statistical results, yet I consider that I am justified in stating that, with this simple remedy, in conjunction with the ordinary hygienic, dietetic, and moral means, a specific will be found for consumption in its first and second stages; and that, for the last, it will be found most potent in controlling the hectic symptoms and the colliquative diarrhoea, without increasing the perspiration, as in the administration of ordinary astringent remedies. When we have only tubercular deposition or softening to deal with, this remedy has a most powerful effect, when combined with judicious counter-irritation; but I do not mean to pretend that, by any species of medication, we could, in any instance, restore a patient with large cavities in the lung, with general tubercular infiltration, ulcerated trachea, and perhaps perforations of the pleura, any more than I would propose a universal remedy for the suppurative hepatization stage of pneumonia. It is needless to argue that, if the disease be removed in the first or second stage, we need not fear the last; and, as these stages usually extend over a lengthened period, and are those in which medical men are usually first consulted, the terrors and suffering of the last stage need not so much appal us.

"The curative effects of chlorate of potass in scrofula are perfectly marvellous; for it appears to exercise double influence when aided by the assistance of lungs comparatively or wholly sound; fifteen or twenty days generally suffice to